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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Jose First name Middle name	Pamela First name R. Middle name
	Bring your picture	Hernandez	Hernandez
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8687	xxx-xx-6113

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Debtor 1 Jose Hernandez
Debtor 2 Pamela R. Hernandez

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
Include trade names and doing business as names	Business name(s)	Business name(s)
	EINs	EINs
Where you live	3638 N. Octavia	If Debtor 2 lives at a different address:
	Chicago, IL 60634 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Cook County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other
	In any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	district. I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINS Where you live 3638 N. Octavia Chicago, IL 60634 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.

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Debtor 1 Jose Hernandez Debtor 2 Pamela R. Hernandez Case number (if known) Tell the Court About Your Bankruptcy Case Part 2: 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When District Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being ☐ Yes. filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When District Case number, if known Debtor Relationship to you When District Case number, if known Do you rent your Go to line 12. No. residence? ☐ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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	tor 1 Jose Hernandez tor 2 Pamela R. Hernan	dez	Case number (if known)	
Par	Report About Any Bu	sinesses	You Own as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code	
	it to this petition.		Check the appropriate box to describe your business:	
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
			Stockbroker (as defined in 11 U.S.C. § 101(53A))	
			Commodity Broker (as defined in 11 U.S.C. § 101(6))	
			■ None of the above	
13.	3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am not filing under Chapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankr Code.	ruptcy
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy	/ Code.
Par	Report if You Own or	Have Any	y Hazardous Property or Any Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and identifiable hazard to public health or safety?		What is the hazard?	
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	statement of ne procedure Bankruptcy
			Number, Street, City, State & Zip Code	

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Debtor 1 Jose Hernandez
Debtor 2 Pamela R. Hernandez

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or

me incapable of realizing or making rational decisions

about finances.

□ Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 2 Pamela R. Hernandez Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16a. individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for □ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 **1**-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jose Hernandez /s/ Pamela R. Hernandez Jose Hernandez Pamela R. Hernandez Signature of Debtor 2 Signature of Debtor 1 Executed on December 8, 2015 Executed on **December 8, 2015** MM / DD / YYYY MM / DD / YYYY

Debtor 1

Jose Hernandez

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Dahtau 1	Jose Hernandez	Document	Page 7 of 62		
Debtor 1 Debtor 2	Pamela R. Hernar	ndez	Ca	se number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Uni for which the person is eligible. I also certify	ited States Code, and have	explained the relief availal	ole under each chapter
	not represented by ey, you do not need s page.	342(b) and, in a case in which § 707(b)(4)(D in the schedules filed with the petition is income.) applies, certify that I have	\ <i>/</i>	,
		/s/ JOHN H. REDFIELD	Date	December 8, 2015	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		JOHN H. REDFIELD			
		Printed name			
		Crane, Heyman, Simon, Welch & Clar	ſ		
		Firm name			
		Suite 3705			
		135 South LaSalle Street			
		Chicago, IL 60603-4297			
		Number, Street, City, State & ZIP Code			

Email address

Contact phone **312-641-6777**

2298090Bar number & State

Certificate Number: 02645-ILN-CC-026410824



CERTIFICATE OF COUNSELING

I CERTIFY that on October 22, 2015, at 8:05 o'clock PM EDT, Jose Hernandez received from 123 Credit Counselors, Inc, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Illinois, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet and telephone.

Date: October 22, 2015

By: /s/RAUL SAGUE

Name: RAUL SAGUE

Title: Certified Credit Counselor

** Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 02645-ILN-CC-026405204



CERTIFICATE OF COUNSELING

I CERTIFY that on October 21, 2015, at 9:37 o'clock PM EDT, Pamela R Hernandez received from 123 Credit Counselors, Inc, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Illinois, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: October 21, 2015

By: /s/Mildred Jimenez

Name: Mildred Jimenez

Title: Credit Counselor

Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

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	otor 1 Jose Hei otor 2 Pamela I	rnandez R. Hernan	idez		Case	number (d known)		
Par	t 6: Answer Th	ese Questi	ions for R	eporting Purposes				
16.	What kind of de	bts do	16a.		nsumer debts? Consumer debts nal, family, or household purpose	are defined in 11 U.S.C. § 101(8) as "incurred by an		
	•			🗆 No. So to line tilb.				
				Yes. Go to line 17.				
			16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
				No. Go to line 16c.				
				☐ Yes. Go to line 17.				
			16c,	State the type of debts you ow	e that are not consumer debts or	business debts		
17.	Are you filing un	nder	□ No.	I am not filling under Chapter 7	. Go to line 18.			
	Do you estimate that after any exempt property is excluded as		Yes.	I am filing under Chapter 7. Do expenses are paid that funds v	o you estimate that after any exen will be available to distribute to un	npt property is excluded and administrative secured creditors?		
	administrative e	xpenses		₩ No				
	are paid that fur be available for distribution to u creditors?			☐ Yes				
18.	How many Creditors do you estimate that you owe?	1-49		☐ 1,000-6,000	25,001-50,000			
		□ 50-99		☐ 5001-10,000	□ 50,001-100,000			
	Ower	OWEF	☐ 100-19 ☐ 200-9		10,001-25,000	☐ More than100,000		
19.	How much do ye	ou	□ \$0 - \$	50.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your as			01 - \$166,030	☐ \$10,000,001 - \$50 m 9/m			
	be worth?			001 - \$500,000	□ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 mill	_		
			S500,	001 - \$1 million	□ \$100,000,001 - \$900 mili	Note than 450 billion		
20.	How much do yo	ou	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your lia			01 - \$100,000	🔲 \$10,000,001 - \$50 millio	_		
	to be?		3 \$100,0	001 - \$500 000	\$50,000,001 - \$100 millio			
			\$500,0	001 - \$1 million	□ \$100,000,001 - \$500 mill	KNI C More than \$50 billion		
Part	7: Sign Below							
For	you					ne information provided is true and correct.		
-			If I have t United St	chosen to file under Chapter 7;- lates Code. I understand the rel	l am aware that I may proceed, if ief available under each chaptar,	eligible, under Chapter 7, 11, 12, or 13 of title 11, and i choose to proceed under Chapter 7.		
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
			I request	relief in accordance with the ch	apter of title 11, United States Co	de, specified in this petition.		
			l understa bankrupte 1519, and	cy case can result in fines up to	concealing property, ecobtaining r \$250,000, or imprisonment for up	money or property by fraud in connection with a p to 20 years or both. 18 U.S.C. §§ 152, 1341,		
				ernandez of Debtor 1	Pamela R. Signature of	Hernandez Debtor 2		
			Executed	on 12-8-15 MM/DD/YYYY	Executed or	12/8/15 MM/DD8 YYYY		

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- 17 4	nnation to identify your	case	النبيت باحد	
Debtor 1	Jose Hernandez	Middle Name	Last Name	
Debtor 2	Pamela R. Hernar	ndez		
(Spouse if, filing)	First Name	kiiddle Name	Last Name	
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT O	FILLINGIS	
Case number (if known)				☐ Check if this is an amended filing
Official For Declara		n Individual D	Debtor's Sched	lules 12/15
If two married :	people are filing togethe	r, both are equally respons	sible for supplying correct in	iformation.
obtaining mone	ey or property by fraud it 18 U.S.C. §§ 152, 1341, 1	n connection with a bankru	uptcy case can result in fine	ng a false statement, concealing property, or a up to \$250,000, or imprisonment for up to 20
SI	gn Below			
		one who is NOT an attorne	ey to help you fill out bankru	ptcy forms?
	ay or agree to pay some	one who is NOT an attorne	ey to help you fill out bankru	ptcy forms?
Did you p	ay or agree to pay some	one who is NOT an attorne	. Attach <i>B</i>	ankruptcy Petition Preparer's Notice, Declaration, ture (Official Form 119).

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	ebtor 1 Jose Hernandez ebtor 2 Pamela R. Hernandez		Case number (if known)	
25.	Have you notified any governmental unit	of any release of hazardous mate	rial?	
	No Yes, Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, ZIP Code)	Environmental law, if you state and know it	Date of notice
26.	Have you been a party in any judicial or a	dministrative proceeding under a	ny environmental law? Include settleme	nts and orders.
	■ No			
	☐ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pa	rt 11; Give Details About Your Business o	or Connections to Any Business		
27.	Within 4 years before you filed for bankru	ptcy, did you own a business or h	have any of the following connections to	any business?
	☐ A sole proprietor or self-employed	i in a trade, profession, or other a	ctivity, either full-time or part-time	
	☐ A member of a limited liability con	npany (LLC) or limited liability pa	rtnership (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing e	executive of a corporation		
	☐ An owner of at least 5% of the vot	ing or equity securities of a corpo	oration	
	No. None of the above applies. Go to	p Part 12.		
	Yes. Check all that apply above and f		usiness.	
	Business Name	Describe the nature of the bus	3	
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookke	peper Dates business existed	
28,		ptcy, did you give a financial state	ement to anyone about your business?	Include all financial
	Institutions, creditors, or other parties.			
	No			
	Yes. Fill in the details below.	Date Innuival		
	Name Address	Date Issued	75 GW	
	(Number, Street, City, State and ZIP Code)			
	t 12: Sign Below			
are t with	re read the answers on this Statement of Fi true and correct. I understand that making a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing pro	perty, or obtaining money or property b	ury that the answers ly fraud in connection
<u>رن</u> Jos	e Hernandez	Pamela R. Hernande	32	
	nature of Debtor 1	Signature of Debtor 2		
Date	/2/8/15	Date /	12-8-15	
Did y N C		nent of Financial Affairs for Individ	duals Filing for Bankruptcy (Official For	m 107)?
Oid y	you pay or agree to pay someone who is no	ot an attorney to help you fill out I	bankruptcy forms?	
N N N	o ss. Name of Person	Attach the Renkruntov Petition	Preparer's Notice, Declaration, and Signal	ture (Official Form 119)
				page 7
JITICIE	al Form 107 State	ment of Financial Affairs for Individuals	e i mind ini namininhmì	Paul Coan Basis atos

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Debtor 1 Debtor 2	Pamela R. Hernandez	Case number (if known)
	DECLARATIO	ON UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR
I declare u that they a	inder penalty of perjury that I have read the true and correct.	he answers contained in the foregoing statement of financial affairs and any attachments thereto an
Date	12-8-15	Signature José Hernandez Debtor
Date	12-8-15	Signature Samely M. Hernandez Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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88 (Form 8) (12/08)

Page 3

Part 3 Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

Signature of Debtor 1

Signature of Debtor 2

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Debtor :			Case number	(d known)			
			Column A Debtor 1	1	Column 8 Debtor 2 o non-filing	or	
8. L	Jnemployment compensation		\$	0.00	\$	0.00	•
	Do not enter the amount if you contend that the amoun inder the Social Security Act. Instead, list it here:	t received was a benefit	-				
`	For you \$	0.00					
	For your spouse 5						
9. f	Pension or retirement income. Do not include any ar penefit under the Social Security Act.	nount received that was a	\$	0.00	\$	0.00	
T r	ncome from all other sources not listed above. Spo To not include any benefits received under the Social Seceived as a victim of a war crime, a crime against hultomestic terrorism. If necessary, list other sources on total below.	Security Act or payments menity, or international or		0.00	•	0.00	
			5	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+ \$	0.00	\$	0.00	
11. (Calculate your total current monthly Income. Add III	nes 2 through 10 for	4,845.43	1	3,757.87	= s	8,603.30
•	each column. Then add the total for Column A to the to	tal for Column B. \$_	4,040.43		3,737.07	"	0,000.00
		L. <u>.</u>		J L		Total c	urrent monthly
Part 2	Determine Whether the Means Test Applies t	o You					
42.6	Calculate your current monthly Income for the year	Follow these steps:	_				
12.0	2a. Copy your total current monthly income from line	11	Сорч	y line 11 l	here=>	5	8,603.30
	2a. Copy your total collent monthly mounted from mo	1,,					
	Multiply by 12 (the number of months in a year)					<u> </u>	
1	2b. The result is your annual income for this part of the	e form			12	b. \$ 10	3,239.60
13. (Calculate the median family income that applies to	you. Follow these steps:				-	
ļ	Fill in the state in which you live.	1L					
l	fill in the number of people in your household.	3					2,343.00
١ -	Fill in the median family income for your state and size To find a list of applicable median income amounts, go or this form. This list may also be avallable at the ban	online using the link specif	ied in the separ	rate instru	13 ctions	5	2,343.00
14, F	low do the lines compare?						
1	4a. Line 12b is less than or equal to line 13. C Go to Part 3.						
1	4b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2, The	presumption o	f abuse is	determined	by Form 1	22A-2.
Part 3	Sign Below						
	By signing here, I declare under penalty of perjun	that the information on this	statement and	in any at	tachments is	true and c	correct.
	x chan // mall	<i>x</i> <u>\</u>	Xulem	71.	nisch	and	
	Jase Hernandez		ela R. Hernar ture of Debtor 2				
	Signature of Debtor 1 Date 2/8//5	Date /	1/8/15	, 			\circ
	MM / DD / YYXY		DD/YYYY				
	If you checked line 14a, do NOT fill out or file For						
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.					

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3. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for reasonable alternative? 11 U.S.C. § 707(b)(2)(B). No. Go to Part 5. Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment: \$ \$ \$ \$ \$ \$ \$ \$ \$	PUKOI I	Jose Hernandez Pamela R. Hernandez	Case	a number (if known)	·	
41b. 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(0)(1) \$ Multiply line 41a by 0.25	41. 4	A Summary of Your Assets and Liabilities and Certain St.	atistical Information			
42. Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt. Check the box that applies: Line 38d is less than line 41b. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Then go to Part 5. Give Details About Special Circumstances 3. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for reasonable alternative? 11 U.S.C. § 707(b)(2)(B). No. Go to Part 5. Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	4			\$		S
26% of your unsecured, nonpriority debt. Check the box that applies: Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Then go to Part 5. Give Details About Special Circumstances 3. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for reasonable alternative? 11 U.S.C. § 707(b)(2)(8). No. Go to Part 5. Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Multiply line 41a by 0.25	.,			l
Go to Part 5. Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Then go to Part 5. art 4: Give Details About Special Circumstances 3. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for reasonable alternative? 11 U.S.C. § 707(b)(2)(B). No. Go to Part 5. Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	25%	of your unsecured, nonpriority debt.	ting all allowed dedu	ctions is enough to pa	У	
art 4: Give Details About Special Circumstances 3. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for reasonable alternative? 11 U.S.C. § 707(b)(2)(B). No. Go to Part 5. Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			m, check box 1, There	is no presumption of ab	use.	
3. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for reasonable alternative? 11 U.S.C. § 707(b)(2)(B). No. Go to Part 5. Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		ine 39d is equal to or more than line 41b. On the top of pagoresumption of abuse. You may fill out Part 4 if you claim speci	e 1 of this form, check al circumstances. Ther	box 2, <i>There is a</i> n go to Part 5.		
No. Go to Part 5. Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	art 4:	Give Details About Special Circumstances				
Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$. Do you reason	a have any special circumstances that justify additional exp nable alternative? 11 U.S.C. § 707(b)(2)(B).	enses or adjustment	s of current monthly in	ncome f	or which there is n
each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	No.	Go to Part 5.				
necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment \$ \$ \$ \$ \$ Sign Below	☐ Yes	 Fill in the following information. All figures should reflect your each item. You may include expenses you listed in line 25. 	average monthly expe	nse or income adjustme	ent for	
Give a detailed explanation of the special circumstances Average monthly expense or income adjustment \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		necessary and reasonable. You must also give your case true	inces that make the ex stee documentation of	penses or income adjus your actual expenses or	stments r income	
art 5: Sign Below		Give a detailed explanation of the special circumstance				
art 5: Sign Below			\$			
art 5: Sign Below			s			
art 5: Sign Below						
	rt 5:	Sign Below				
			nation on this stateme	nt and in any attachmen	ils is true	and correct.
x 2 - hund Samele & Heman	X	In - times	Lamel	wy. He	<u> </u>	, ele
Jose Hernandez Signature of Debtor 1 Signature of Debtor 2						X
Date /2/8//5 Date /2/8//5	Date	12 8 // 5	10/01	115		~

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United States Bankruptcy Court Northern District of Illinois

In re	Jose Hernandez Pameia R. Hernandez		Case No.	
		Dcbtor(s)	Chapter 7	
	VERI	FICATION OF CREDITOR MA	ATRIX	
		Number of C	reditors:	14
	The above-named Debtor(s) he (our) knowledge.	reby verifies that the list of creditor	rs is true and correct to	o the best of my
Date:	12-8-15	Jose Hernandez	f	
Date:	12-8-15	Signature of Debtor Pamela R. Hernandez Signature of Debtor	L manu	

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Page 18 of 62 Document Fill in this information to identify your case: Jose Hernandez Middle Name Last Name First Name Pamela R. Hernandez

(Spouse if, filing) Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an

Official Form 106Sum

Debtor 1

Debtor 2

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	150,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	179,254.77
	1c. Copy line 63, Total of all property on Schedule A/B	\$	329,254.77
Par	t 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	314,805.80
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	134,041.36
	Your total liabilities	\$	448,847.16
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,934.85
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,806.78
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1	Jose Hernandez	
Debtor 2	Pamela R. Hernandez	Case number (if known)
		

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 8.

8,603.30

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Tot	al claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	67,632.89
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	67,632.89

	Ca	se 15-41434	Doc 1		2/08/15 ment	Entered 12/08 Page 20 of 62	/15 13:44:23	Des	c Main	
Fill	in this inforr	mation to identify yo	our case and th							
Deb	otor 1	Jose Hernande	ez							
		First Name		e Name		Last Name				
	otor 2	Pamela R. Heri								
(Spo	use, if filing)	First Name	Middle	e Name		Last Name				
Unit	ed States Ba	nkruptcy Court for the	e: NORTHER	N DISTRI	ICT OF ILLIN	IOIS				
Cas	e number _					-		[☐ Check if this is amended filing	
Sc In each	ch category, se best. Be as co	omplete and accurate a	ribe items. List a	o married	people are fili	asset fits in more than one ng together, both are equa tional pages, write your na	ally responsible for su	pplying c	orrect information. If	think
Part	1: Describe	Each Residence, Build	ing, Land, or Oth	ner Real Es	state You Own	or Have an Interest In				
_	No. Go to Part									
1.1	0000 N O	-1		What is	the property	? Check all that apply.				
	3638 N. O	ctavia if available, or other descrip	tion		Single-family h	ome			ns or exemptions. Put ns on Schedule D:	the
	Street address,	n avanable, or other descrip	lion		Duplex or mult Condominium	i-unit building or cooperative			Secured by Property.	
					Manufactured (or mobile home	Current value of	tha	Current value of the	
	Chicago	IL 6	0634-0000		Land		entire property?	uie	portion you own?	
	City	State	ZIP Code		Investment pro	perty	\$150,00	0.00	\$150,000.	00
				Who ha	Timeshare Other as an interest Debtor 1 only	in the property? Check		ple, tenan	r ownership interest cy by the entireties,	
	Cook				Debtor 2 only					
	County				Debtor 1 and D	Debtor 2 only	Chack if this	e is comm	unity property	
					At least one of	the debtors and another	(see instruct		unity property	
					nformation yo	u wish to add about this it	em, such as local			

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$150,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Debto	r 2 Pamela R. Hernandez	Ca	se number (if known)	
Car	s, vans, trucks, tractors, sport utility	vehicles, motorcycles		
	lo.			
□ N				
— Y	es			
3.1	Make:	Who has an interest in the property? Check one.	Do not deduct secured cl	laims or exemptions. Put
3.1	Model:	Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
	Year:	Debtor 2 only		, , ,
	Approximate mileage:	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	☐ At least one of the debtors and another		,
[2013 Honda Fit, 34,000 miles	7		
		Check if this is community property (see instructions)	\$9,800.00	\$9,800.0
3.2	Make:	Who has an interest in the property? Check one.	Do not deduct secured cl	laims or exemptions. Put
,. <u>_</u>	Model:	Debtor 1 only		ed claims on Schedule Di ims Secured by Property.
	Year:	Debtor 2 only		
	Approximate mileage:	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	☐ At least one of the debtors and another	, , , , ,	, ,
	2013 Hyundai Sonata (lease)			
		☐ Check if this is community property (see instructions)	\$0.00	\$0.
Exa ■ N	<i>mples:</i> Boats, trailers, motors, personal lo	s and other recreational vehicles, other vehicles, and watercraft, fishing vessels, snowmobiles, motorcycle and the state of the state		
Exam ■ N □ Y	mples: Boats, trailers, motors, personal lo 'es d the dollar value of the portion you	I watercraft, fishing vessels, snowmobiles, motorcycle and some state of the state	accessories ny entries for	00 008 6\$
Exal	mples: Boats, trailers, motors, personal lo 'es d the dollar value of the portion you ges you have attached for Part 2. Wr	own for all of your entries from Part 2, including arite that number here	accessories ny entries for	\$9,800.00
Exal N Y Ad .pag	mples: Boats, trailers, motors, personal logonic feet with the dollar value of the portion you ges you have attached for Part 2. Wr	own for all of your entries from Part 2, including arite that number here	ny entries for	Current value of the portion you own? Do not deduct secure
Add .pag	mples: Boats, trailers, motors, personal loofes dethe dollar value of the portion you ges you have attached for Part 2. Wr Describe Your Personal and Household ou own or have any legal or equitable usehold goods and furnishings amples: Major appliances, furniture, line No	own for all of your entries from Part 2, including are ite that number here	ny entries for	Current value of the portion you own? Do not deduct secure
Add page art 3:	mples: Boats, trailers, motors, personal locates decided for value of the portion you ges you have attached for Part 2. Wr Describe Your Personal and Household ou own or have any legal or equitable usehold goods and furnishings amples: Major appliances, furniture, line No Yes. Describe	own for all of your entries from Part 2, including ar ite that number here	ny entries for	Current value of the
Example 1 Add page 1 State 2 Add page 2 Add	mples: Boats, trailers, motors, personal locates decided for value of the portion you ges you have attached for Part 2. Wr Describe Your Personal and Household ou own or have any legal or equitable usehold goods and furnishings amples: Major appliances, furniture, line No Yes. Describe	own for all of your entries from Part 2, including are ite that number here	ny entries for	Current value of the portion you own? Do not deduct secure claims or exemptions
Add page art 3:	mples: Boats, trailers, motors, personal look es d the dollar value of the portion you ges you have attached for Part 2. Wr Describe Your Personal and Household ou own or have any legal or equitable usehold goods and furnishings amples: Major appliances, furniture, line No Yes. Describe Household furnishings	own for all of your entries from Part 2, including ar ite that number here	ny entries for	Current value of the portion you own? Do not deduct secure claims or exemptions
Add .pag	d the dollar value of the portion you ges you have attached for Part 2. Wr Describe Your Personal and Household ou own or have any legal or equitable usehold goods and furnishings amples: Major appliances, furniture, line No Yes. Describe Household furnishings amples: Televisions and radios; audio, including cell phones, cameras No	own for all of your entries from Part 2, including arite that number here	accessories ny entries for	Current value of the portion you own? Do not deduct secure claims or exemptions. \$2,000
Elector	d the dollar value of the portion you ges you have attached for Part 2. Wr Describe Your Personal and Household ou own or have any legal or equitable usehold goods and furnishings amples: Major appliances, furniture, line No Yes. Describe Household furnishings amples: Televisions and radios; audio, including cell phones, cameras No Yes. Describe	own for all of your entries from Part 2, including arite that number here	accessories ny entries for	Current value of the portion you own? Do not deduct secure claims or exemptions. \$2,000.

☐ Yes. Describe.....
Official Form 106A/B

Case 15-41434 Doc 1 Filed 12/08/15 Entered 12/08/15 13:44:23 Desc Main Page 22 of 62 Document Jose Hernandez Pamela R. Hernandez Case number (if known) Debtor 2

15 Pa Do	Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information 5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	
15 Pa Do	No Yes. Give specific information 5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	Current value of the portion you own? Do not deduct secured claims or exemptions.
15 Pa D c	No Yes. Give specific information 5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	Current value of the portion you own? Do not deduct secured claims or exemptions.
15 Pa Do	No Yes. Give specific information 5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	Current value of the portion you own? Do not deduct secured claims or exemptions.
15 Pa	No Yes. Give specific information Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	Current value of the portion you own? Do not deduct secured
15 Pa	No Yes. Give specific information Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$3,600.00
	■ No □ Yes. Give specific information 5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$3,600.00
	■ No	
14.		
	□ No ■ Yes. Describe two dogs	\$0.00
13.	Non-farm animals Examples: Dogs, cats, birds, horses	
	■ Yes. Describe wedding rings	\$1,000.00
	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, No	gold, silver
	■ Yes. Describe Ordinary wearing apparel	\$400.00
	. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No □ Yes. Describe	
	Yes. Describe	
	New Personika	
	■ No	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments No	s and kayaks; carpentry tools;

Official Form 106A/B

Debtor 1

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	ebtor 1 ebtor 2	Jose Herr Pamela R	nandez . Hernandez			Case number (if known)	
18	. Bonds,	, mutual fund	ds, or publicly tra	nded stocks			
	Examp ■ No	oles: Bond fur	nds, investment ac	counts with broker	age firms, money market accounts		
			Instit	ution or issuer nam	e:		
19			stock and interest	ests in incorporate	ed and unincorporated business	es, including an interest in	an LLC, partnership,
	and jo ■ No	int venture					
	_	Give specific		t them			
			Name of	entity:		% of ownership:	
20	Negoti	iable instrume	ents include persor	nal checks, cashier	ole and non-negotiable instruments' checks, promissory notes, and mer to someone by signing or delivering	noney orders.	
	☐ Yes.	Give specific	information about Issuer na				
21	Retiren	ment or nens	ion accounts				
۱ ک	_Examp			eogh, 401(k), 403(l	b), thrift savings accounts, or other	pension or profit-sharing pla	ns
	□ No ■ Yes	l ist each acc	ount separately.				
	_ 100.	List caon acc	Type of acc	count:	Institution name:		* • • • • • • • • • • • • • • • • • • •
_					(Husband) Current Employ		\$9,934.72
					Pension (Wife) as of 12/31/	13	\$73,041.00
					Jose's Pension - Schindler	Elevator	\$80,000.00
22	Your sl Examp	hare of all unitional of the second of the s	ents with landlords	have made so tha	t you may continue service or use f lic utilities (electric, gas, water), tele Institution name or individual:		s, or others
23	. Annuit i ■ No	ies (A contrad	ct for a periodic pa	ayment of money to	you, either for life or for a number	of years)	
	☐ Yes		Issuer name and	d description.			
24			ation IRA, in an a 1), 529A(b), and 5		fied ABLE program, or under a qu	ualified state tuition progra	am.
	☐ Yes		Institution name	and description. Se	eparately file the records of any inte	erests.11 U.S.C. § 521(c):	
25	■ No	•			r than anything listed in line 1), a	nd rights or powers exerci	sable for your benefit
	☐ Yes.	Give specific	information abou	t them			
26					ther intellectual property rom royalties and licensing agreem	ents	
	☐ Yes.	Give specific	information abou	t them			
27			es, and other gen permits, exclusive		tive association holdings, liquor lice	nses, professional licenses	
	_	Give specific	information abou	t them			
M	loney or	property owe	ed to you?				Current value of the portion you own? Do not deduct secured

claims or exemptions.

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If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

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\$0.00

\$0.00

\$179,254.77

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

Part 6: Total farm- and fishing-related property, line 52

Part 7: Total other property not listed, line 54

\$329,254.77

\$179,254.77

Official Form 106A/B

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		Docume	TIL TAUC ZU UT UZ	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jose Hernandez			
	First Name	Middle Name	Last Name	
Debtor 2	Pamela R. Herna	ndez		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	e Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
3638 N. Octavia Chicago, IL 60634 Cook County	\$150,000.00		\$30,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2013 Honda Fit, 34,000 miles	\$9,800.00		\$2,400.00	735 ILCS 5/12-1001(c)
Ellie IIoIII Genedale AVB. G.1			100% of fair market value, up to any applicable statutory limit	
Household furniture and miscellaneous itesm - between 5 and	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)
15 years old Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	
computer & 2 larger tvs & 1 small	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Ordinary wearing apparel	\$400.00		100%	735 ILCS 5/12-1001(a)
LING HOTH SCHEUUIG PVD. 11.1			100% of fair market value, up to any applicable statutory limit	

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Page 27 of 62 Document Jose Hernandez Debtor 1 Debtor 2 Pamela R. Hernandez Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B wedding rings 735 ILCS 5/12-1001(b) \$1,000.00 \$1,000.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit two dogs 735 ILCS 5/12-1001(b) \$0.00 \$0.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit **PNC Bank Joint Checking** 735 ILCS 5/12-1001(b) \$2.879.05 \$2,879.05 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit (Husband) Current Employer 735 ILCS 5/12-1006 \$9,934.72 100% Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Jose's Pension - Schindler Elevator 735 ILCS 5/12-1006 \$80,000.00 100% Line from Schedule A/B: 21.3 100% of fair market value, up to any applicable statutory limit State Farm Life Insurance 735 ILCS 5/12-1001(f) \$0.00 100% Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit Metropolitan Life Insurance 735 ILCS 5/12-1001(f) \$0.00 100% Line from Schedule A/B: 31.2 П 100% of fair market value, up to

any applicable statutory limit

3.	•	laiming a homestead exemption of more than \$155,675? adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)
	Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
		No
	П	Ves

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Fill in this informat	tion to identify you	r case:				
Debtor 1	Jose Hernandez	,				
	First Name	Middle Name	Last Name			
Debtor 2	Pamela R. Herna	andez				
(Spouse if, filing)	First Name	Middle Name	Last Name		•	
United States Bankr	runtey Court for the	NORTHERN DISTRICT OF ILL	INOIS			
Office Otates Bariki	upicy Court for the.	NOT THE REPORT OF THE				
Case number						
(if known)					☐ Check	if this is an
					ameno	ded filing
Official Farms	1000					
Official Form 2						
Schedule D	: Creditors	Who Have Claims :	Secured	by Propert	У	12/15
		two married people are filing together number the entries, and attach it to the				
1. Do any creditors hav	e claims secured by	your property?				
☐ No. Check th	is box and submit th	nis form to the court with your other	r schedules. Yo	ou have nothing else	to report on this form.	
_		·	concadioo. To	ou navo nou iing oloo	to roport or time form.	
Yes. Fill in all	I of the information	below.				
Part 1: List All S	ecured Claims			0-1	Oak was D	0-1
each claim. If more tha	an one creditor has a pa	ore than one secured claim, list the cred articular claim, list the other creditors in F er according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral that supports this	Column C Unsecured portion
2.1 Honda Finar	ncial Services	Describe the property that secures the	he claim:	value of collateral. \$8,329.80	claim \$9,800.00	If any \$0.00
Creditor's Name		2013 Honda Fit, 34,000 miles		Ψο,ο2ο.οσ		40.00
		201011011001111, 01,0001111100				
PO Box 6000	01	As of the data was file the alain in the				
City of Indus	stry, CA	As of the date you file, the claim is: (apply.	Sheck all that			
91716		Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only			nortgage or secur	red		
Debtor 2 only						
■ Debtor 1 and Debto	,	☐ Statutory lien (such as tax lien, med	nanic's lien)			
At least one of the d		☐ Judgment lien from a lawsuit	A 4 a			
☐ Check if this claim community debt	relates to a	Other (including a right to offset)	Auto			
community dest						
Date debt was incurre	ed	Last 4 digits of account numb	oer 0961			
Walls Farge	Homo					
2.2 Wells Fargo Mortgage	поше	Describe the property that secures the	he claim:	\$306,476.00	\$150,000.00	\$156,476.00
Creditor's Name		3638 N. Octavia Chicago, IL				
		Cook County	00004			
P.O. Box 14	547	-				
Des Moines,	, IA	As of the date you file, the claim is: 0 apply.	Check all that			
50306-4547		☐ Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as n	nortgage or secur	red		
Debtor 2 only		car loan)	de antida P			
■ Debtor 1 and Debto	•	☐ Statutory lien (such as tax lien, med	nanic's lien)			
At least one of the d		Judgment lien from a lawsuit				
Check if this claim community debt	relates to a	Other (including a right to offset)				
Date debt was incurre	ed	Last 4 digits of account numb	er 2565			

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Debtor 1	Jose Hernandez			C	ase number (if know)	
	First Name	Middle Name	Last Name	_		
Debtor 2	Pamela R. Herna	ndez				
	First Name	Middle Name	Last Name			
Add the	dollar value of your ent	ries in Column A on this	s page. Write that nun	ber here:	\$314,805.80	
	the last page of your fo t number here:	rm, add the dollar value	totals from all pages		\$314,805.80	
Part 2:	ist Others to Be No	tified for a Debt Tha	t Vou Already Liste	d		
Use this pa to collect f creditor fo	age only if you have oth	ners to be notified about owe to someone else, I you listed in Part 1, list t	t your bankruptcy for a	debt that you alr	e collection agency here. Simi	ple, if a collection agency is trying ilarly, if you have more than one be notified for any debts in Part 1,
Na	me Address					
-NO	ONE-			On which line	in Part 1 did you enter	the creditor?
				Last 4 digits o	of account number	

Case 15-41434 Doc 1 Filed 12/08/15 Entered 12/08/15 13:44:23 Desc Main Page 30 of 62 Document Fill in this information to identify your case: Debtor 1 Jose Hernandez Middle Name Last Name First Name Debtor 2 Pamela R. Hernandez (Spouse if, filing) Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 26,895.12 AT&T Universal Card 6314 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? PO Box 6284 Sioux Falls, SD 57117-6284 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit card** Other. Specify

4.2 Capital One Bank
Priority Creditor's Name

PO Box 6492

Carol Stream, IL 60197-6492

Number Street City State Zlp Code

Last 4 digits of account number 6696

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

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10.631.24

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ebtor 2 Pamela R. Hernandez	Case number (if know)		
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only			
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and anoth	ther Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a comm	unity Student loans		
debt Is the claim subject to offset?			
	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify		
Chase Freedom	Last 4 digits of account number 6604	\$	6,982.93
Priority Creditor's Name PO Box 15123	When was the debt incurred?		
Wilmington, DE 19850-5123	when was the dept incurred?		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only			
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and anoth	- (1)-1-1-1-1		
☐ Check if this claim is for a commi			
debt	anny a clader realis		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify		
4 Chase Slate	Last 4 digits of account number 8690	\$	10,256.25
Priority Creditor's Name			
PO Box 15123 Wilmington, DE 19850-5123 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply		
	As of the date you me, the dain is. Oneon all that apply		
Who incurred the debt? Check one.	☐ Contingent		
☐ Debtor 1 only ☐ Debtor 2 only	☐ Unliquidated		
_	·		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and anoth			
☐ Check if this claim is for a commodebt	unity		
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	$\hfill\Box$ Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify		
5 Discover	Last 4 digits of account number 6696	\$	8,431.57
Priority Creditor's Name PO Box 6103 Carol Stream, IL 60197-6103	When was the debt incurred?	_	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		

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Debto Debto	Pamela R. Hernandez	Case number (if know)		
	Who incurred the debt? Check one.	☐ Contingent		
	☐ Debtor 1 only	<u> </u>		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt			
	Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.6	FedLoan-Dept of Education	Last 4 digits of account number 1770	\$	15,621.53
	Priority Creditor's Name PO Box 530210	When was the debt incurred?	·	·
	Atlanta, GA 30353-0210 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	Ç		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	■ Student loans		
	debt	_		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.7	Great Lakes	Last 4 digits of account number	\$	52,011.36
	Priority Creditor's Name PO Box 7860 Madison, WI 53707-7860	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	■ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Student Loan		
	11 1 . 1 Marca			0.00
4.8	Hyundai Motor Finance Priority Creditor's Name	Last 4 digits of account number	\$	0.00
	PO Box 660891 Dallas, TX 75266-0891	When was the debt incurred?		

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4.11	State Farm Life Insurance	Last 4 digits of account number	5353	\$	0.00
	Yes	Other. Specify			
	■ No	_	y piano, and other offilial debto		
	.	not report as priority claims Debts to pension or profit-sharin	-		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did		
	☐ Check if this claim is for a community	☐ Student loans			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 only	☐ Contingent			
	Who incurred the debt? Check one.	As of the date you file, the claim is	э. Опеск ан шасарргу		
	Atlanta, GA 30353-0942 Number Street City State Zlp Code	As of the data you file the alaim:	s: Check all that apply		
	Priority Creditor's Name PO Box 530942	When was the debt incurred?			
4.10	Sam's Club/Synchrony Bank	Last 4 digits of account number	5622	\$	2,189.44
	Yes	■ Other. Specify Yearly	!		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	•	not report as priority claims	· ·		
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans			
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	_	☐ Disputed			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Unliquidated			
	Who incurred the debt? Check one.	☐ Contingent			
	Des Moines, IA 50306-0444 Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply		
	Mercer Voluntary Benefits PO Box 10444	When was the debt incurred?			
	Priority Creditor's Name	Last 4 digits of account number	<u>7233</u>	\$	1,021.32
4.9	Metropolitan Life	Lock A distinct of account of the	9293	•	1,021.92
	Yes	Other. Specify Car Le	ease		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did		
	☐ Check if this claim is for a community debt	☐ Student loans			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	■ Debtor 1 and Debtor 2 only	Disputed			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 only	_			
	Who incurred the debt? Check one.	☐ Contingent			
		· · · · · · · · · · · · · · · · · ·	s: Check all that apply		

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Debtor 1 Jose Hernandez	Document	Page 34 of 62
Debtor 2 Pamela R. Hernandez		Case number (if know)
2702 Ireland Grove Bloomington, IL 61710	When was the debt in	ncurred?
Number Street City State Zlp Code	As of the date you file	e, the claim is: Check all that apply
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORIT	TY unsecured claim:
☐ Check if this claim is for a community debt	☐ Student loans	
Is the claim subject to offset?	Obligations arising not report as priority cla	out of a separation agreement or divorce that you did aims
■ No	Debts to pension o	r profit-sharing plans, and other similar debts
Yes	Other. Specify	Life insurance premium and Auto Inurance
Part 3: List Others to Be Notified About a De	ebt That You Already L	Listed
trying to collect from you for a debt you owe to som	eone else, list the original listed in Parts 1 or 2, list	r a debt that you already listed in Parts 1 or 2. For example, if a collection agency is I creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have the additional creditors here. If you do not have additional persons to be notified for
Name Address •NONE-	On which entry in Line of (Check one	Part 1 or Part2 did you list the original creditor?): Part 1: Creditors with Priority Unsecured Claims
	Last 4 digits of acc	Part 2: Creditors with Nonpriority Unsecured Claims count number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total claim	
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim	
	6f.	Student loans	6f.	\$	67,632.89
Total claims	_				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	66,408.47
	6j.	Total. Add lines 6f through 6i.	6j.	\$	134,041.36

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Page 35 of 62 Document Fill in this information to identify your case: Debtor 1 Jose Hernandez Middle Name Last Name First Name Debtor 2 Pamela R. Hernandez (Spouse if, filing) Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Hyundai Motor Finance PO Box 660891 Dallas, TX 75266-0891	\$379.62/monthly lease payments for 2013 Hyundai Sonata with 30,000 miles

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Fill in th			ent Page 36 d	of 62	
	is information to identify you				
Debtor 1	Jose Hernande	z			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, t		Middle Name	Last Name		
	3,				
United S	tates Bankruptcy Court for the	: NORTHERN DISTRIC	1 OF ILLINOIS		
Case nur	mber				☐ Check if this is an
. ,					amended filing
Officia	al Form 106H				
	dule H: Your Co	debtors			12/15
JUILE	dule II. Toul Co	uebioi 5			12/13
ill it out,		he boxes on the left. Attac	ch the Additional Page		ded, copy the Additional Page, f any Additional Pages, write
1. Do	o you have any codebtors? (If you are filing a joint case	, do not list either spouse	as a codebtor.	
■ N	0				
☐ Ye	es				
2. W	rithin the last 8 years, have yona, California, Idaho, Louisiar				tates and territories include
	,,,	ia, riciada, ricii ilicxico, r	uello Nico, Texas, Wasii		
Arizo		ia, Nevada, New Wexies, I	uello Nico, Texas, Wasii		
Arizo	o. Go to line 3. es. Did your spouse, former sp				
Arizo	o. Go to line 3.				
Arizo	o. Go to line 3. es. Did your spouse, former spoumn 1, list all of your codene 2 again as a codebtor onl	pouse, or legal equivalent li ebtors. Do not include you y if that person is a guara	ve with you at the time? ur spouse as a codebtountor or cosigner. Make	sure you have listed the	
Arizo	o. Go to line 3. es. Did your spouse, former spolumn 1, list all of your code ne 2 again as a codebtor onl n 106D), Schedule E/F (Offic	ebtors. Do not include you y if that person is a guara ial Form 106E/F), or Sche	ve with you at the time? ur spouse as a codebtountor or cosigner. Make	sure you have listed the 06G). Use Schedule D, Sc	or to whom you owe the debt
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Street

State

Number

City

ZIP Code

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Del	otor 1 Jose Her	nandez				
	otor 2 use, if filing)	R. Hernandez				
Uni	ted States Bankruptcy Court for	the: NORTHERN DISTRIC	T OF ILL	INOIS		
(If kr	se number 					d filing nt showing postpetition chapter as of the following date:
	fficial Form 106I				MM / DD/ Y	YYY
S	chedule I: Your Ir	ncome				12/15
Par	t1: Describe Employme		onal pag	es, write your name and o	case number (if I	known). Answer every question
1.			Dobtor	1	Dobtor 2	or non filing chauca
1.	information.		Debtor		_	or non-filing spouse
1.		, Employment status	■ Emp		Debtor 2 ■ Emplo □ Not en	yed
1.	information. If you have more than one job attach a separate page with	Employment status Occupation	■ Emp	bloyed	■ Emplo	yed
1.	information. If you have more than one job attach a separate page with information about additional	Employment status Occupation	■ Emp	ployed	■ Emplo	yed nployed Assistant
1.	information. If you have more than one job attach a separate page with information about additional employers. Include part-time, seasonal, or	Occupation Employer's name	■ Employers	oloyed employed o Technologies, Inc.	■ Emplo □ Not en Dental A John Si: 350 S. N	yed nployed Assistant
I.	information. If you have more than one job attach a separate page with information about additional employers. Include part-time, seasonal, o self-employed work. Occupation may include students	Occupation Employer's name	■ Employers Not Faspr Produ 500 Carling	oloyed employed o Technologies, Inc. ction Supervisor ampas Dr.	■ Emplo □ Not en Dental A John Sis 350 S. N Park Ric	yed nployed Assistant sto DDS lorthwest Hwy.
	information. If you have more than one job attach a separate page with information about additional employers. Include part-time, seasonal, o self-employed work. Occupation may include students	Occupation Employer's name Employer's address How long employed the	■ Employers Not Faspr Produ 500 Carling	oloyed employed o Technologies, Inc. ction Supervisor ampas Dr. ton Heights, IL 60004	■ Emplo □ Not en Dental A John Sis 350 S. N Park Ric	yed nployed Assistant sto DDS lorthwest Hwy. dge, IL 60068
Par Esti	information. If you have more than one job attach a separate page with information about additional employers. Include part-time, seasonal, o self-employed work. Occupation may include stude or homemaker, if it applies.	Employment status Occupation Employer's name Employer's address How long employed to	Faspr Produ 500 C Arling	oloyed employed o Technologies, Inc. ction Supervisor ampas Dr. ton Heights, IL 60004 5 years	■ Emplo □ Not en Dental A John Sis 350 S. N Park Ric	yed nployed Assistant sto DDS lorthwest Hwy. dge, IL 60068
Par Esti spou	information. If you have more than one job attach a separate page with information about additional employers. Include part-time, seasonal, o self-employed work. Occupation may include stude or homemaker, if it applies.	Employment status Occupation Employer's name Employer's address How long employed the Monthly Income The date you file this form. If the more than one employer, compared to the complexity of the more than one employer, compared to the complexity of the more than one employer, compared to the complexity of the co	■ Employ Not Faspr Produ 500 Carling here?	bloyed employed o Technologies, Inc. ction Supervisor ampas Dr. ton Heights, IL 60004 5 years	■ Emplo □ Not en Dental A John Sis 350 S. N Park Ric 10 ne, write \$0 in the	yed nployed Assistant sto DDS lorthwest Hwy. dge, IL 60068

2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	4,845.43	\$	3,757.87
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$_	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	4,845.43	\$_	3,757.87

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	tor 1 tor 2	Jose Hernandez Pamela R. Hernandez		С	ase nu	ımber (<i>if k</i>	nown)				
	Cop	y line 4 here	4.		For D	ebtor 1 4,84	5.43		Debtor 2 of filing spou	ıse	
_	_									-	
5.		all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$		0.91	\$		2.70	
	5b.	Mandatory contributions for retirement plans	5b.		\$		0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c.		\$		2.28	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d.		\$		0.00	\$		0.00	
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.		\$		2.56	\$ 		0.00	
	51. 5g.	Union dues	5i. 5g.		⊅ Տ		0.00	Φ		0.00	
	5g. 5h.	Other deductions. Specify:	5g. 5h.		\$		0.00	+ \$		0.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		· —	1,82		\$		2.70	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9		3,01		\$			
			7.	4	<u> </u>	3,01	9.00	Ψ	2,915). I <i>T</i>	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. :	\$		0.00	\$	(0.00	
	8b.	Interest and dividends	8b.	. :	\$		0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	nt 8c.	. ;	\$		0.00	\$	(0.00	
	8d.	Unemployment compensation	8d.	. :	\$	(0.00	\$	(0.00	
	8e.	Social Security	8e.	. :	\$	(0.00	\$		0.00	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	. :	\$ 	(0.00	\$ 	C	0.00	
	8h.	Other monthly income. Specify:	8h.	.+ :	\$	(0.00	+ \$		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$			0.00	\$		0.00	
10	Cald	culate monthly income. Add line 7 + line 9.	10	Ф		040.60	. [2.04	E 47	<u> </u>	E 024 0E
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ	٥,	019.68	- [2,9	15.17 = 5	Ψ	5,934.85
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedulade contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not include any amounts already included in lines 2-10 or amounts that are not include any amounts already included in lines 2-10 or amounts that are not include any amounts already included in lines 2-10 or amounts that are not include any amounts already included in lines 2-10 or amounts that are not included in lines 2-10 or amounts th	our depe					·	chedule J. 11. +\$	S	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The re that amount on the Summary of Schedules and Statistical Summary of Certies							12. \$		5,934.85
13.		ou expect an increase or decrease within the year after you file this for	m?							mbinonthly	ed income
	П	Yes, Explain:									

Check if this is: Check if this is: Check if this is: An amended filling An ame	Fill	in this informa	ation to identify yo	our case:						
Debtor 2 Pamela R. Hernandez	Deb	tor 1	Jose Hernan	dez			Ch	eck if this is	:	
United States Bankungtcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (If known)			Pamela R. H	ernande	2			A suppler	nent show	
Case number (If known) Comparison Compa	` '		unator Count for the	NODTL		uoie.				
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. The property of the four Household	Unit	ed States Bankr	ruptcy Court for the:	NORTE	IERN DISTRICT OF ILLIP	NOIS		MIMI / DD	/ YYYY	
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part Describe Your Household										
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information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. a										
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 Yes. Fill out this information for each dependent Dependent's relationship to Debtor 2 age live with you? Do not state the dependents names. Daughter 23 Yes. No Yes. No Yes. No Yes. No Yes. Set mate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy [filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy Is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have Included it on Schedule I: Your Income (Official Form 106I.) If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 0.00 4d. Home maintenance, repair, and upkee pexpenses 4d. \$ 0.00 4d. Home maintenance, repair, and upkee pexpenses 4d. \$ 0.00 4d. Home maintenance, repair, and upkee pexpenses 4d. \$ 0.00	info	ormation. If m	nore space is ne	eded, atta	ch another sheet to this					
No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. Go to line 2. No. Yes. Debtor 2 must file Official Form 106.1-2, Expenses for Separate Household of Debtor 2. No. Do not list Debtor 1 No. Pack. Fill out this information for and Debtor 2. Do not state the dependents names. Daughter Daughter 23 Pes. No. No. Yes. No. No. No. Yes. No. Yes. No. No. No. No. Yes. No. No. No. Yes. No. N	Par			hold						
Yes. Does Debtor 2 live in a separate household? No	1.	_								
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Daughter Daug		_		in a separ	ate household?					
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Daughter No Yes No No Yes Daughter No Yes No No Yes Daughter No No No Yes Daughter No No No Yes Daughter Daughter No No No Your expenses as of your bankruptcy filing date unless you are using this form as supplement in a Chapte			-	st file Offic	ial Form 106J-2, <i>Expense</i>	es for Separate Hous	sehold of D	ebtor 2.		
and Debtor 2. Debtor 1 or Debtor 2 age live with you? Do not state the dependents names. Daughter 23 Yes Yes No Yes And No Yes Stimate Your Ongoing Monthly Expenses Estimate Your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. Real estate taxes 4a. \$ 0.00 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4d. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. Homeowner's association or condominium dues	2.	Do you have	e dependents?	□ No						
dependents names. Daughter 23 Yes No Yes No Yes No Yes No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Home maintenance, repair, and upkeep expenses 4d. Home maintenance, repair, and upkeep expenses 4d. Home mointenance, repair, and upkeep expenses				■ Yes.					dent's	
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expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 2,252.37 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues										☐ Yes
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues	3.	expenses o	f people other t	han $_{\square}$	• • •					
the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 2,252.37 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00	Est exp	imate your ex enses as of a	xpenses as of year the l	our bankr	uptcy filing date unless	you are using this to plemental <i>Schedul</i>	form as a s le <i>J</i> , check	supplemen the box at	t in a Ch the top o	apter 13 case to report of the form and fill in the
payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4. \$ 2,252.37 4a. \$ 0.00 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 100.00 4d. \$ 0.00	the	value of suc	h assistance an					,	our exp	enses
4a.Real estate taxes4a.\$0.004b.Property, homeowner's, or renter's insurance4b.\$0.004c.Home maintenance, repair, and upkeep expenses4c.\$100.004d.Homeowner's association or condominium dues4d.\$0.00	4.				-	Include first mortgaç	ge 4.	\$		2,252.37
4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00		If not include	ded in line 4:							
4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00		4a. Real e	estate taxes				4a.	\$		0.00
4d. Homeowner's association or condominium dues 4d. \$ 0.00		4b. Prope	erty, homeowner's							0.00
• • • • • • • • • • • • • • • • • • • •								·		
	5.					ome equity loans				

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	tor 1	Jose He				
Deb	tor 2	Pamela I	R. Hernandez	Case num	ber (if known)	
6.	Utilit	ios.				
0.	6a.		, heat, natural gas	6a.	\$	285.00
	6b.	-	wer, garbage collection	6b.	\$	81.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	230.00
	6d.		ecify: Internet, cable	6d.	\$	177.00
7.	Food		ekeeping supplies	7.	\$	600.00
8.			children's education costs	8.	\$	0.00
9.	Cloth	ning, laund	ry, and dry cleaning	9.	\$	150.00
10.		_	products and services	10.	\$	50.00
11.	Medi	ical and de	ntal expenses	11.	\$	120.00
12.	Trans	sportation.	Include gas, maintenance, bus or train fare.			
			ar payments.	12.	\$	400.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and boo	oks 13.	\$	100.00
14.	Char	itable cont	ributions and religious donations	14.	\$	0.00
15.		rance.				
			surance deducted from your pay or included in lines 4		Φ.	400.00
		Life insura		15a.	*	190.00
		Health ins		15b.		0.00
		Vehicle in		15c.	*	100.00
			Irance. Specify:	15d.	\$	0.00
16.			clude taxes deducted from your pay or included in lines		c	0.00
17	Spec	,	ease payments:	16.	\$	0.00
17.			ents for Vehicle 1	17a.	\$	379.62
			ents for Vehicle 2	17b.	· -	280.79
			ecify: Student loans	176. 17c.	*	311.00
		Other. Spe		17c. 17d.		0.00
1Ω			of alimony, maintenance, and support that you did		Ψ	0.00
10.			your pay on line 5, <i>Schedule I, Your Income</i> (Officia		\$	0.00
19.			s you make to support others who do not live with y		\$	0.00
	Spec		, · · · · ·	19.		
20.	Othe	r real prop	erty expenses not included in lines 4 or 5 of this for	rm or on Schedule I: Y	our Income.	
	20a.	Mortgages	s on other property	20a.	\$	0.00
	20b.	Real estat	e taxes	20b.	\$	0.00
	20c.	Property, I	homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
00	0-1-					
22.		-	monthly expenses		•	5 000 70
			through 21.	Farms 400 L 0	\$	5,806.78
			2 (monthly expenses for Debtor 2), if any, from Official	Form 106J-2	\$	
	22c.	Add line 22	a and 22b. The result is your monthly expenses.		\$	5,806.78
23	Calc	ulate vour i	monthly net income.			
_0.			12 (your combined monthly income) from Schedule I.	23a.	\$	5,934.85
			monthly expenses from line 22c above.	23b.		5,806.78
						<u> </u>
	23c.	Subtract y	our monthly expenses from your monthly income.			400.0-
			is your monthly net income.	23c.	\$	128.07
	_			<u>.</u>	_	
24.			an increase or decrease in your expenses within the			or degrade begaves of a
			u expect to finish paying for your car loan within the year or do y terms of your mortgage?	ou expect your mortgage pa	ayırıeni to increase	e or decrease because of a
	■ No					
			Evplain here:			
	□ Ye	to.	Explain here:			

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Fill in this	information to identify your	case:			
Debtor 1	Jose Hernandez				
Deploi	First Name	Middle Name	Last Name		
Debtor 2	Pamela R. Hernai				
(Spouse if, filing		Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	per				
(if known)					☐ Check if this is an amended filing
If two marri You must fi obtaining m		r, both are equally responding the bankruptcy schedules to connection with a bank	onsible for supplying	correct information.	atement, concealing property, or 000, or imprisonment for up to 20
	Sign Below				
Did yo	ou pay or agree to pay some	one who is NOT an attor	rney to help you fill c	out bankruptcy forms?	
	No				
	Yes. Name of person			. Attach Bankruptcy Peta and Signature (Official F	ition Preparer's Notice, Declaration, Form 119).
	penalty of perjury, I declare ey are true and correct.	that I have read the sum	nmary and schedules	s filed with this declara	tion and
X /s/	/ Jose Hernandez		X /s/ Pam	nela R. Hernandez	

Pamela R. Hernandez

Date December 8, 2015

Signature of Debtor 2

Jose Hernandez

Signature of Debtor 1

Date December 8, 2015

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Fill	in this inforn	nation to identify your	r case:			
	otor 1	Jose Hernandez				
		First Name	Middle Name	Last Name		
	otor 2	Pamela R. Herna				
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	se number own)				_	theck if this is an mended filing
Sta	s complete a	of Financial A	ble. If two married people		equally responsible for sup	
num	ber (if knowr	n). Answer every ques	tion.	·	y additional pages, write yo	ur name and case
Par			rital Status and Where You	u Lived Before		
1.	What is your	current marital statu	s?			
	■ Married□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you li	ved in the last 3 years. Do r	not include where you live nov	v.	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					nity property state or territor ico, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (C	official Form 106H).		
D		•	`	,		
Par	Explain	n the Sources of You	rincome			
4.	Fill in the tota	I amount of income yo	u received from all jobs and	ng a business during this y all businesses, including par ve together, list it only once u		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$43,994.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Pamela R. Hernandez Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) \$54,149.00 ☐ Wages, commissions, \$0.00 ■ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$0.00 \$0.00 ☐ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$48,000.00 \$0.00 ☐ Wages, commissions, Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$0.00 \$37,500.00 □ Wages, commissions, ■ Wages, commissions. bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income Sources of income **Gross income** Describe below.. (before deductions and Describe below. (before deductions exclusions) and exclusions) 2014 - IRA \$9.000.00 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? \square No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Debtor 1

Jose Hernandez

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Debtor 1 Jose Hernandez
Debtor 2 Pamela R. Hernandez

Case number (if known)

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Honda Financial Services	Aug., Sept, Oct., Nov. 2015	\$1,123.16	\$8,329.80	☐ Mortgage ☐ Car
City of Industry, CA 91716	1407. 2010			☐ Car ☐ Credit Card
ony or maden y, 07101110				☐ Loan Repayment
				☐ Suppliers or vendors
				Other
Hyundai Motor Finance	Aug, Sept., Oct. &	\$1,504.40	\$0.00	☐ Mortgage
PO Box 660891	Nov. 2015			☐ Car
Dallas, TX 75266-0891	\$376.10 per month			☐ Credit Card
	on lease			☐ Loan Repayment
				☐ Suppliers or vendors
				☐ Other
FedLoan-Dept of Education	Aug, Sept., Oct. &	\$640.00	\$15,855.51	□ Mortgogo
PO Box 530210	Nov. 2015	φυ-τυ.υυ	ψ10,000.01	☐ Mortgage ☐ Car
Atlanta, GA 30353-0210	\$160.00 per month			☐ Car ☐ Credit Card
	titores bar manni			☐ Credit Card ☐ Loan Repayment
				☐ Loan Repayment☐ Suppliers or vendors
				☐ Other
Wells Fargo Home Mortgage	Aug, Sept., Oct. &	\$9,009.48	\$306,476.00	☐ Mortgage
P.O. Box 14547	Nov. 2015			☐ Car
Des Moines, IA 50306-4547	\$2,252.37 per			☐ Credit Card
	month			☐ Loan Repayment
				☐ Suppliers or vendors
				☐ Other
Sam's Club/Synchrony Bank	\$200 in Sept.,	\$700.00	\$1,841.93	□ Mortgogo
PO Box 530942	\$300 in Oct and	φ100.00	φ1,041.93	☐ Mortgage ☐ Car
Atlanta, GA 30353-0942	\$200 in Nov. 2015			☐ Car☐ Credit Card
	V =00			☐ Loan Repayment
				☐ Suppliers or vendors
				☐ Other
				□ Otilei
State Farm Car Insurance	\$567.72 in Sept,	\$866.97	\$0.00	☐ Mortgage
2702 Ireland Grove	\$299.25 in Oct.			☐ Car
Bloomington, IL 61710	2015			☐ Credit Card
				☐ Loan Repayment
				☐ Suppliers or vendors
				☐ Other

7.

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	btor 1 btor 2	Jose Hernandez Pamela R. Hernandez		Cas	e number (if kno	wn)	
8.	inside	n 1 year before you filed for bankruptoer? le payments on debts guaranteed or cos		yments or transfer a	any property o	n account of a d	ebt that benefited a
	1	No					
		Yes. List all payments to an insider					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still own		this payment litor's name
Pa	rt 4:	Identify Legal Actions, Repossession	s, and Foreclosures				
9.	List al	n 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes.					
	_	No Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of th	e case
10.		n 1 year before you filed for bankrupto k all that apply and fill in the details below		erty repossessed, f	oreclosed, gar	nished, attached	d, seized, or levied?
		No Yes. Fill in the information below.					
	Cred	litor Name and Address	Describe the Property		Da	ite	Value of the
			Explain what happene	d			property
11.	accol	n 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.		cluding a bank or fir	nancial institu	tion, set off any	amounts from your
	Cred	litor Name and Address	Describe the action the	e creditor took		ite action was ken	Amount
12.		n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a		erty in the possessi	ion of an assig	gnee for the bend	efit of creditors, a
		No Yes					
Pai		List Certain Gifts and Contributions					
13.	I	n 2 years before you filed for bankrup	tcy, did you give any gif	ts with a total value	of more than	\$600 per person	?
		Yes. Fill in the details for each gift.	December the wifte		D-		Value
		with a total value of more than \$600 person	Describe the gifts	i		ites you gave e gifts	Value
	Pers Addr	on to Whom You Gave the Gift and ress:					
14.	= 1	n 2 years before you filed for bankrup		ts or contributions v	with a total val	ue of more than	\$600 to any charity
		Yes. Fill in the details for each gift or con					
	more Char	or contributions to charities that totale than \$600 rity's Name (Sessential Control of C	al Describe what yo	u contributed		ntributed	Value
Pa		List Certain Losses					

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other

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disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property toonsulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property transfer was made Description and value of any property Date payment Date	Case number (if known)			
Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property transf				
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Crane, Heyman, Simon, Welch & Clar \$2,500.00 August - November				
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No ■ Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Crane, Heyman, Simon, Welch & Clar \$2,500.00 \$2,500.00 August - November	Value of property lost			
consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Crane, Heyman, Simon, Welch & Clar 135 S. LaSalle Street Preparing a bankruptcy petition? Description and value of any property transferred or transfer was made August - November				
Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Crane, Heyman, Simon, Welch & Clar 135 S. LaSalle Street Description and value of any property transferred or transfer was made Payment, if Not You \$2,500.00 August - November	/ to anyone you			
Address transferred or transfer was made Person Who Made the Payment, if Not You Crane, Heyman, Simon, Welch & Clar 135 S. LaSalle Street \$2,500.00 August - November				
135 S. LaSalle Street November	Amount of payment			
Chicago, IL 60603	\$2,500.00			
 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. 	/ to anyone who			
Person Who Was Paid Description and value of any property Or transfer was made	Amount of payment			
 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other that transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your proinclude gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 				
Address property transferred payments received or debts paid in exchange	Date transfer was made			
Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of w beneficiary? (These are often called asset-protection devices.) ■ No □ Yes. Fill in the details.	which you are a			
	Date Transfer was made			

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Debtor 1 Jose Hernandez
Debtor 2 Pamela R. Hernandez

Case number (if known)

Pai	rt 8: List of Certain Financial Accounts	Instrumen	ts, Safe Depo	sit Boxes, and St	torage Uni	ts	
20.	Within 1 year before you filed for bankru sold, moved, or transferred? Include checking, savings, money marke	•	•				, ,
	houses, pension funds, cooperatives, as					ic, shares in banks, orear	t unions, brokerage
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		digits of nt number	Type of according trument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within cash, or other valuables?	1 year befo	ore you filed f	or bankruptcy, a	ny safe de	posit box or other depos	itory for securities,
	■ No						
	☐ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code	e) Ac	ho else had ad Idress (Number, ate and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage un	nit or place	other than yo	ur home within 1	year befo	re you filed for bankrupto	су
	■ No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)				Do you still have it?		
		Sta	te and zir code)				
Pai	rt 9: Identify Property You Hold or Cont	rol for Som	eone Else				
23.	Do you hold or control any property that for someone.	someone e	else owns? Inc	clude any proper	ty you bor	rowed from, are storing f	or, or hold in trust
	=						
	■ No □ Yes. Fill in the details.						
		14/	h a u a i a 4 h a u a u		Dagariba	the managements	Value
	Owner's Name Address (Number, Street, City, State and ZIP Code	e) (NL	here is the pro umber, Street, City de)		Describe	the property	Value
Pai	rt 10: Give Details About Environmental	Information	1				
For	the purpose of Part 10, the following defi	nitions app	ly:				
	Environmental law means any federal, st toxic substances, wastes, or material int regulations controlling the cleanup of th	o the air, la	ınd, soil, surfa	ice water, ground	• .		
	Site means any location, facility, or prop to own, operate, or utilize it, including di	-	-	y environmental	law, wheth	ner you now own, operate	e, or utilize it or used
	Hazardous material means anything an e	environmen	tal law define	s as a hazardous	s waste, ha	azardous substance, toxid	c substance,
Rep	port all notices, releases, and proceedings	·		gardless of wher	n they occi	urred.	
	Has any governmental unit notified you						mental law?
	-						
	No						
	Yes. Fill in the details.						_
	Name of site Address (Number, Street, City, State and ZIP Code	e) Ac	overnmental u ddress (Number, ^o Code)	Init Street, City, State and		onmental law, if you it	Date of notice

Entered 12/08/15 13:44:23 Case 15-41434 Doc 1 Filed 12/08/15 Document Page 48 of 62 Debtor 1 Jose Hernandez Debtor 2 Pamela R. Hernandez Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Employer Identification number Business Name** Describe the nature of the business **Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers 18 U.S.C. §§ 152, 1341, 1519, and 3571.

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

/s/ Jose Hernandez /s/ Pamela R. Hernandez Jose Hernandez Pamela R. Hernandez Signature of Debtor 1 Signature of Debtor 2 Date December 8, 2015 Date **December 8, 2015**

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

☐ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Case 15-41434 Doc 1 Filed 12/08/15 Entered 12/08/15 13:44:23 Desc Main Document Page 49 of 62

Debtor 1 Jose Hernandez

Debtor 2 Pamela R. Hernandez

Case number (if known)

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Debtor 1 Jose Hernandez

Debtor 2 Pamela R. Hernandez Case number (if known)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 8, 2015

Signature Is/ Jose Hernandez
Jose Hernandez
Debtor

Date December 8, 2015

Signature Is/ Pamela R. Hernandez
Pamela R. Hernandez
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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Fill in this infor	mation to identify your			
Debtor 1	Jose Hernandez			
	First Name	Middle Name	Last Name	
Debtor 2	Pamela R. Hernar	ndez		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

 For any creditors that you listed in Part 1 of Schedule D): Creditors Who Have Claims Secured by Property (O	official Form 106D), fill in the
information below.		
Identify the creditor and the property that is collateral	What do you intend to do with the property that	Did you claim the propert

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Honda Financial Services name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of 2013 Honda Fit, 34,000 miles property securing debt:	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's Wells Fargo Home Mortgage name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property 3638 N. Octavia Chicago, IL 60634 Cook County securing debt:	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

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B8 (Form 8) (12/08) Page 2

Lessor's name: Hyundai Motor Finance

Yes

Description of leased

\$379.62/monthly lease payments for 2013 Hyundai Sonata with 30,000

Property: miles

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B8 (Form 8) (12/08) Page 3

Par	t 3: Sig	gn Below	
	•	ty of perjury, I declare that I have indicate t is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
Χ	/s/ Jos	se Hernandez	χ /s/ Pamela R. Hernandez
	Jose F	lernandez errandez	Pamela R. Hernandez
	Signature of Debtor 1		Signature of Debtor 2
	Date	December 8, 2015	Date December 8, 2015

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 15-41434 Doc 1 Filed 12/08/15 Entered 12/08/15 13:44:23 Desc Main Document Page 58 of 62

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	Jose Hernandez		Case No.		
111 1	Pamela R. Hernandez	Debtor(s)	Chapter	7	
		.,	-		
	DISCLOSURE OF COMPENSAT	TON OF ATTO	RNEY FOR DE	CBTOR(S)	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	2,165.00	
	Prior to the filing of this statement I have received		\$	2,165.00	
	Balance Due		\$	0.00	
2.	\$_335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compensation	n with any other person	unless they are memb	pers and associates	of my law firm.
			•		•
	☐ I have agreed to share the above-disclosed compensation wire copy of the agreement, together with a list of the names of the copy of the agreement.				law firm. A
6.	In return for the above-disclosed fee, I have agreed to render leg	gal service for all aspec	ts of the bankruptcy c	ase, including:	
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;d. [Other provisions as needed]				
7.	7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: adversary proceedings, complaints to determine dischargeability of debt and complaints objecting to discharge, redemption proceedings, abandonment proceedings, motions to dismiss or to convert the Chapter 7 case to another Chapter under the Bankruptcy Code or representation of the Debtor in such a converted case.				
	CER	TIFICATION			
this	I certify that the foregoing is a complete statement of any agreen bankruptcy proceeding.	nent or arrangement for	payment to me for re	presentation of the	debtor(s) in
December 8, 2015 /s/ JOHN H. REDFIELD					
Date		JOHN H. REDFIE Signature of Attorna			
		Crane, Heyman,	Simon, Welch & C	ar	
		Suite 3705 135 South LaSall	e Street		
		Chicago, IL 6060	3-4297		
		312-641-6777 Fa	ax: 312-641-/114		

LAW OFFICES

CRANE, HEYMAN, SIMON, WELCH & CLAR

EUGENE CRANE ARTHUR G. SIMON DAVID K. WELCH SCOTT R. CLAR JEFFREY C. DAN

JOHN H. REDFIELD BRIAN P. WELCH

GLENN R. HEYMAN, OF COUNSEL THOMAS W. GOEDERT, OF COUNSEL

Dear New Client:

SUITE 3705 135 SOUTH LASALLE STREET CHICAGO, ILLINOIS 60603-4297

> (312) 641-6777 FAX (312) 641-7114

WWW.CRANEHEYMAN.COM

This letter is to confirm the agreement reached with you concerning the retention of the law firm of Crane, Heyman, Simon, Welch & Clar ("CHSW&C") for purposes of a workout of your existing debt or the filing of a Chapter 7 bankruptcy case on your behalf. After review of this letter, please sign on the signature lines provided, acknowledging your understanding of the terms of our retention, and return the original to our office.

Scope of Services

It is contemplated that our representation will include the following:

- Review of documents presented to us;
- 2. Preparation of petition, schedules, statement of affairs and other documents for filing;
- 3. Correspondence and phone conferences with creditors and other parties regarding automatic stay;
- 4. Preparation for and attendance at one Meeting of Creditors;
- 5. Negotiating reaffirmation agreements; and
- 6. Advising you regarding your rights, duties and other aspects of the bankruptcy laws.

Exclusions

THE RETAINER SET FORTH IN THIS AGREEMENT DOES NOT INCLUDE CONTESTED MATTERS OR ADVERSARY LITIGATION, IF ANY, INCLUDING BUT NOT LIMITED TO EXEMPTION DISPUTES, ABUSE OF BANKRUPTCY SYSTEM PURSUANT TO 11 U.S.C. § 707, LIEN AVOIDANCE, DISCHARGE AND DISCHARGEABILITY COMPLAINTS AND DISPUTES. IT ALSO DOES NOT INCLUDE 2004 EXAMINATIONS, AUDITS, REAFFIRMATION HEARINGS, MEANS DISPUTES, TAX DISPUTES, DIVORCE DISPUTES, UNUSUAL PRODUCTIONS OF DOCUMENTS AND OTHER NON-ROUTINE MATTERS.

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LAW OFFICES

CRANE, HEYMAN, SIMON, WELCH & CLAR

as an advance payment You have or will have paid the sum of \$ retainer for this engagement. In consideration of the payment of this retainer, CHSW&C agrees to provide legal services on your behalf in connection with the matters for which CHSW&C has been retained.

This retainer agreement does not cover adversary proceedings including, but not limited to, discharge and dischargeability cases. This retainer is non-refundable and is treated as income by CHSW&C upon its receipt. You retain no legal or equitable interest in the retainer.

For your information the current hourly rates for CHSW&C are as follows:

Eugene Crane Arthur G. Simon David K. Welch Scott R. Clar	\$495.00 \$480.00 \$480.00 \$480.00
Jeffrey C. Dan	\$405.00 \$380.00 \$285.00
Glenn R. Heyman (Of Counsel) Thomas W. Goedert (Of Counsel)	\$495.00 \$425.00

The above hourly rates are subject to change on January 1 of each year.

Thank you for the opportunity to be of service to you. We look forward to a successful relationship. Of course, should there be any questions concerning our representation, please do not hesitate to contact the undersigned.

Very truly yours,

AGREED, ACCEPTED AND UNDERSTOOD:

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United States Bankruptcy Court Northern District of Illinois

In re	Jose Hernandez Pamela R. Hernandez		Case No.	
		Debtor(s)	Chapter 7	
	VE	ERIFICATION OF CREDITOR M	MATRIX	
		Number of	f Creditors:	13
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credi	tors is true and correct to the	he best of my
Date:	December 8, 2015	/s/ Jose Hernandez		
		Jose Hernandez		
		Signature of Debtor		
Date:	December 8, 2015	/s/ Pamela R. Hernandez		
		Pamela R. Hernandez		
		Signature of Debtor		

AT&T Universel 15-41434 Doc 1 PO Box 6284 PODBewment 942Page 62 of 62 Atlanta, GA 30353-0942 Desc Main

Capital One Bank PO Box 6492 Carol Stream, IL 60197-6492 Bloomington, IL 61710

State Farm Life Insurance 2702 Ireland Grove

Chase Freedom PO Box 15123 Wilmington, DE 19850-5123 Des Moines, IA 50306-4547

Wells Fargo Home Mortgage P.O. Box 14547

Chase Slate PO Box 15123 Wilmington, DE 19850-5123

Discover PO Box 6103 Carol Stream, IL 60197-6103

FedLoan-Dept of Education PO Box 530210 Atlanta, GA 30353-0210

Great Lakes PO Box 7860 Madison, WI 53707-7860

Honda Financial Services PO Box 60001 City of Industry, CA 91716

Hyundai Motor Finance PO Box 660891 Dallas, TX 75266-0891

Metropolitan Life Mercer Voluntary Benefits PO Box 10444 Des Moines, IA 50306-0444